



AYURVEDIC MANAGEMENT OF VATAJA ABHISHYANDA W.S.R TO ALLERGIC CONJUNCTIVITIS – A CASE STUDY

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ABSTRACT

Abhishyanda is one among the *Sarvagata Netraroga*^[1] and is considered as root cause for all eye diseases. This article presents a case study of a 16 year old Female patient with allergic conjunctivitis. She visited OPD of Shalakya Tantra at GAMC Bengaluru with complaints of itching, pricking pain, foreign body sensation, redness, watering and puffiness of bilateral eyes. The symptoms of *vataja abhishyanda* can be correlated to allergic conjunctivitis. Treatments such as *Deepana*, *Pachana*, *Nasya*, *Netra seka* and internal medication with regular follow-ups were scheduled to monitor the disease progression. There was significant improvement in symptoms in both eyes. Thus, it can be concluded that, ayurvedic management is helpful in treating allergic conjunctivitis.

KEYWORDS: *Vataja abhishyanda*, Allergic conjunctivitis, *Nasya*, *Netra seka*.

I. INTRODUCTION

Simple allergic conjunctivitis is type-1 mediated hypersensitivity reaction, mediated by IgE and mast cell activation, following exposure of ocular surface to airborne allergens.^[2]

Prevalence of allergic conjunctivitis is high and it is supposed to be the most common allergic disorder. Approximately 22% of adolescents currently suffer from allergic conjunctivitis. In India currently it is estimated that at least 20% of the total general population suffers from allergic conjunctivitis. The symptoms of allergic conjunctivitis include itching, pricking pain, foreign body sensation, watering of eyes.

Vataja abhishyanda is explained in classics under *Sarvagata Netraroga*. According to *Acharya Sushruta*, *Vataja Abhishyanda Lakshanas* include *Nistoda* (pricking pain), *Stambhana* (stiffness), *Sangharsha* (foreign body sensation), *Parushyata* (roughness), *Vishushkabhava* (dryness), *Shishirashutha* (cold discharge) and *Shirobhitapa* (headache).^[3]

Simple allergic conjunctivitis can be seasonal, due to seasonal allergens such as tree and grass pollens or perennial, due to allergens such as house dust, animal hairs. Treatment of allergic conjunctivitis in modern science include medications like antihistamines, eye decongestants, cold compress, topical corticosteroids,

mast cell stabilizers etc which is expensive.^[4] Moreover, these drugs are to be used life long to keep the condition under control. *Ayurvedic* treatment provide better relief, and it includes *Langhana* (fasting), *Alepana* (application of medicated paste over eyes), *Sweda* (sudation), *Virechana* (purgation), *Siravyada* (venepuncture), *Nasya*, *Seka*, *Aschyotana* etc.^[5] Here, patient was treated with *Nasya* and *Seka*.

MATERIALS AND METHODS

Case report- A female patient, aged 16 years, came to OPD of Shalakya Tantra, GAMC Bengaluru with chief complaints like feeling of pricking pain, redness, itching, watering, foreign body sensation of bilateral eyes since 1 year.

History of present illness- Patient was apparently healthy 1 year ago, later developed pricking pain, redness, itching, watering, foreign body sensation of bilateral eyes which worsens late evening. For these complaints, she approached Shalakya Tantra OPD of GAMC Bengaluru for treatment.

History of past illness- No history of systemic illness or trauma to eyes

Family history- Not contributory

Personal history

Appetite – Reduced

Bowel – Constipated

Sleep – Disturbed

Diet – Mixed

Ashtavidha pareeksha

Nadi – Vata-pittaja

Mala – Vikrutha

Mutra – 4-5 times/ day

Jihva – Lipta

Shabda – Prakrutha

Sparsha – Ruksha

Drik – Vikrutha

Akruti – Avara

General examination

BP- 110/70 mmhg

PR – 78/min

R.R – 17/min

Systemic examination

Respiratory system – NAD

Cardiovascular system – S1 S2 normal

Central Nervous System – Conscious and oriented.

EXAMINATION OF EYE

SLIT LAMP EXAMINATION

OCULAR EXAMINATION	RIGHT EYE	LEFT EYE
Lid	Presence of papillae	Presence of papillae
Conjunctiva	Congested	Congested
Sclera	Normal	Normal
Cornea	Clear	Clear
Anterior chamber	Normal depth	Normal depth
Iris	Normal	Normal
Lens	Clear	Clear
Vision	DVA 6/6, NVA N ₆	DVA 6/6, NVA N ₆

TREATMENT

TREATMENT	DRUG	DOSE & DURATION
Deepana, Pachana	Chitrakadi Vati ^[6]	1 TID B/F for 3 days
Nasya	Anutaila ^[7]	8 drops both nostrils for 7 days
Seka	Triphala Haridra Ksheerapaka	7 days
Internal Medication	Haridra khand ^[8]	1/2tsp BD with milk B/F for 15 days

Triphala haridra ksheera seka – 1 part of Triphala and Haridra Churna is taken to which 8 parts of Ksheera and 32 parts of water is added. The mixture is boiled until the water evaporates and only milk remains. The mixture is filtered and used for Seka when it turns luke warm.

II. FOLLOW UP & RESULT

Total treatment duration was 32 days, subject showed improvement both subjectively and objectively. Pricking pain, itching foreign body sensation, watering of eyes, redness reduced.

SYMPTOMS	0 TH DAY	10 TH DAY After Nasya	17 TH DAY After Ksheeraseka	32 ND DAY Follow-up
Kandu	+++	++	+	-
Nistoda	+++	+	+	-
Sangharsha	+++	++	-	-
Vishushkabhava	++	+	+	+
Shishirashruta	++	+	-	-
Raga	++	+	-	-

III. DISCUSSION

Nasya is considered the best line of treatment for all Urdhwajatrugata Vikaras. Anutaila is Vataghna, Brumhana and Snehana.^[8]

Netra Seka with Triphala Haridra Ksheerapaka is helpful in reducing the symptoms. Ksheera has the properties like Madhura rasa, Guru Snigdha Guna, Sheeta veerya, Madhura Vipaka and is Chakshushya. Triphala has the property of anti-inflammatory, immunomodulating, antibacterial and wound healing property. Haridra is Kandughna, Shodhahara, Chakshushya, Vedanasthapana, Shulaprashamana which

reduce signs and symptoms of Vataja Abhishyanda.

Mode of action of Parisheka is quick and efficient as the absorption through thin layer of eyelid skin is enhanced by heat and continuous exposure to the liquid drug for a short period of time. The thickness of eyelid skin is 0.05cm which is the thinnest skin in our body. Increased temperature of skin increases the penetration by direct effect on diffusion within the skin. The temperature affects stratum corneum causing higher permeability and enhancing dermal absorption. Thereby use of parisheka drug at a specific temperature over the eyelids for a proper time of dhara gives good absorption of medicines

and reduce local inflammation and pain.

IV. CONCLUSION

Allergic conjunctivitis is one of the most common cases encountered by ophthalmologists in OPD. In Bengaluru, due to the natural dry and dusty weather and heavy industrialization, individuals in this area are prone to allergy of the eye. *Langhana*, *Alepana*, *Sweda*, *Virechana*, *Siravyada*, *Nasya*, *Seka*, *Aschyotana* etc are the treatment modalities explained as *vishesha chikitsa* in classics. *Nasya* with *anutaila* and *triphalaharidra ksheera seka* with *haridrakhanda* internally showed significant results in signs and symptoms of allergic conjunctivitis. This line of treatment showed considerable improvement subjectively and objectively. Thus, it can be concluded that the ayurvedic approach is helpful in the treatment of *Vataja Abhishyanda*.

V. REFERENCES

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